

# How To Become An Approved Staff Development Trainer

Individuals interested in providing staff development training to the staff of licensed child care facilities in Mississippi must be approved by the MSDH Child Care Facilities Licensure Division. Approval must be received before the offering of the training. The application packet below includes the following items:

- Staff Development Trainer Reference Guide
- Trainer Application Form
- Trainer Agreement

Applications are reviewed in February, May, August, and November of each year.



### Mississippi Department of Health Child Care Licensure Staff Development Trainer Reference Guide



According to the *Regulations Governing Licensure of Child Care Facilities* published by the Mississippi Department of Health, all child care staff, directors, director designees, and caregivers shall be required to complete 15 contact hours of staff development, accrued during the licensure year, annually. The National Association for the Education of Young Children (NAEYC), a leading organization in child care and early childhood education recommends annual training based on the needs of the program and the pre-service qualifications of the staff.

Regulations Governing Licensure of Child Care Facilities states that contact hours for staff development shall be approved by the licensing agency.

According to NAEYC's position statement, *Conceptual Framework for Early Childhood Professional Development,* "providers of effective professional development experiences have an appropriate knowledge and experience base."

The Child Care Licensure Division of the Mississippi Department of Health is committed to improving the quality of child care across the state by ensuring a high standard of training for child care professionals. To meet the educational needs of professionals in early care and education, it is essential that the training be conducted by knowledgeable, qualified, and highly effective instructors.

In the past, no specific criteria for establishing qualifications for trainers existed in the Division of Child Care Licensure. After gathering information from Southern Early Childhood Association, and the National Child Care Information and Technical Assistance Center, and training criteria already established by the states of Florida, Arizona, and Georgia, a set of criteria was established to evaluate trainer applications.

#### Trainer Approval at a Glance...

- All Trainers must meet specific criteria in order to be an approved trainer for child care licensing regulations requirements.
- Criteria are based upon education and experience in the field of early care and learning, or in other areas pertinent to the needs of child care providers. To meet that criteria, each applicant must meet the following requirements:
  - Associates Degree, plus 10 years experience; or
  - Bachelors Degree, plus 3 years experience; or
  - Masters Degree or above, plus 0 years experience
- Once approved, trainers must reapply every 2 years to maintain state-approved trainer status.
- All approved trainers must submit documentation of continuing education hours received in the field of early care and learning or adult learning at the following rate before receiving renewal:
  - Associates Degree 15 hours
  - Bachelors Degree 10 hours
  - Masters Degree or above 5 hours
- Once approved, trainers will be given a unique trainer code that shall appear on all certificates issued by the trainer. These codes will signify that the trainer has received approval from the Mississippi State Department of Health, Child Care Facilities Licensure Division.



## Mississippi Department of Health Child Care Licensure Staff Development Trainer Application



#### PLEASE PRINT CLEARLY

Complete ALL sections clearly and completely in ink only.

Print name as you want it to appear on all correspondence and certificates.

Name		Date		
Mailing Address		Apt. #		
City	State	Zip	County	
Home Phone		Cell Phone		
Work Phone		Email Address		
Other last names used that cou	uld be on documents (i.e	. Maiden name)		
EDUCATIONAL BACKGROU	ND (Check all that apply	<u>):</u>		
□ Associate's Degree in				
□ Bachelor's Degree in				
□ Master's Degree in				
□ Other				
child development, elementary	education. child care. si	pecial education, psyd	d be in the field of early childhood edu chology (with emphasis on child psych	
•	(with emphasis on child	development), or chil lited colleges or unive	chology (with emphasis on child psych d development technology, or in the formal transities will be accepted.	
family and consumer sciences area of expertise. Only degree  WORK EXPERIENCE Facility Name Address	(with emphasis on child	development), or chil lited colleges or unive	chology (with emphasis on child psych d development technology, or in the fi ersities will be accepted.	
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Facility Name			
Address			
Position Held			
Dates of Employment			
Supervisor's Name and Contact Number			
PROFESSIONAL DOCUMENTATION			
The following documentation must be submitted with the initial application. Please note that information you submit on the			
trainer application will be verified via supporting documentation you submit with your application.			
□ Photocopy of official final transcripts from a regionally accredited college or institution indicating degree conferred.			
□ Curriculum outline for every training and agenda for every training.			
□ Professional resume with complete professional work experience with children.			
□ Two professional letters of recommendation in reference to your ability as a trainer.			
<b>DO NOT</b> mail originals of educational verification.			
<b>DO NOT</b> fax this form – an original signature is required.			
An application fee of \$50.00 must accompany each request for program review/approval.			
Incomplete applications will delay your acceptance.			
Mail all documents to:			
Nancy B. Nunley, HPSS Mississippi State Department of Health Child Care Licensure P.O. Box 1700 Jackson, MS 39215-1700			
I certify that the information on this application is complete and accurate to the best of my knowledge.			
Print Name Date			
Signature			



## Mississippi Department of Health Child Care Licensure Staff Development Trainer Trainer Agreement



Please initial at beginning of each statement to indicate agreement.

Trainer Signature	Date
I understand that violation of any of the above statements may place approx applications in jeopardy.	val of this and/or future training approval
After a probationary period, trainer is required to apply as a new trainer and trainer agreement.	I must meet all qualifications and sign a new
If a state approved trainer is found in breach of his/her signed trainer agrees training shall be removed for a time limit decided by Mississippi State Dep Division. A permanent withdrawal of trainer/training approval status may Health, Child Care Licensure Division. Examples of breaches and revocati  Submitting a training that has been plagiarized and/or not auti Presenting a training as state-approved, when it is not state-ap  Awarding more hours of state-approved credit to an individua (permanent trainer/training probation)  Distributing a certificate of state-approved training to someon trainer probation)	artment of Health, Child Care Licensure be instituted by Mississippi State Department of on periods are as follows: nored by you (one year training probation) oproved (one year training probation) all or individuals than what was actually provided
I understand that a representative from Mississippi State Department randomly monitor any state approved training for quality control purposes	
As a state-approved trainer, I agree to conduct myself in a manner the childhood care and education field.	nat will enhance the integrity of the early
I understand my trainer code is unique to my trainings and me. This training approved by Mississippi Department of Health, Child Care Licensu	
I understand trainings are approved for two (2) years.	
I understand a training certificate cannot be distributed to anyone who arrives more than 15 minutes late or leaves early.	no does not attend the full training or anyone
I understand training certificates must contain accurate and required certificate information will be provided in my letter of trainer approval.	information. I understand the list of required
I agree to reference the appropriate works cited information for all re	eferences used and adhere to copyright laws.
I agree that the application submitted accurately reflects the training	content and number of hours.